RELATED SERVICE PROVIDER SUMMARY

| SOF | | | | | | | T O T A |
|-----------|--|--|--|--|---|---|------------------|
| LOCATION | REQUIREMENTS REVIEWED | | | | I | О | L |
| II.B.5.c | During the evaluation/reevaluaton process, do you provide the MET team information? | | | | | - | |
| II.B.9.b | Dies the MET/IEP team discuss whether or not a student needs assistive technology, evaluation, services, or devices? | | | | | | |
| III.B.4.h | Does the IEP team determine the need for related services? | | | | | | |
| III.B.4.i | Does the IEP team determine appropriate supplementary aids, services, and adaptations? | | | | | | |
| IV.B.2 | Are IEP being implemented as written, including in the regular classroom, related services, etc.? | | | | | | |
| IV.B.9 | Has the district/school informed you of procedures to ensure confidentiality? | | | | | | |
| V.B.1.b | Do you have any concerns regarding your school's special ed. Program? | | | | | | |

| STRENGTHS: | | | |
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| CONCERNS: | | | |
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